NEWTOWN HERITAGE FESTIVAL



A CELEBRATION OF THE HISTORY OF STEPHENS CITY, VIRGINIA

APPLICATION FOR PARTICIPATION IN THE NEWTOWN HERITAGE FESTIVAL

I/we wish to participate in: You may select more than one option. Entry fees ma	y apply. Additional rules/information will be provided.
Demonstrating Artisan	Food Vendor
Apple Crate Derby (maximum age 13) Crafts Business Display/Sales	Parade Beauty Pageant (maximum age 21)
Donation \$ or certificates/merchandise	Volunteer
Indiv/Group Name	
Phone #s: HomeCe	ell Work
E-mail address	
Artisan/Crafter/Business/Parade/Food Attach separate sheet if necessary.	d: Description of Entry, Items to be sold or displayed.
Is any electricity required for you Size of booth/trailer	Name of the second seco
Apple Crate Derby/Beauty Pageant:	
DOB of participant//_	School
Parent Name (print)	

Food vendors must comply with Health Department regulations and complete a separate Health Department application. Food vendors must also provide an Insurance Certificate naming the Newtown Heritage Festival and the Town of Stephens City as "Additional Insured" parties.

Any items sold must have prices prominently displayed throughout the Festival.

A parent or legal guardian must sign giving permission for any participant under the age of 18.

The NHF Committee reserves the right to reject any application. All participants must adhere to specific event rules. Participants may be asked to leave if violations occur. Entry fees will be forfeited if the participant is required to leave.

WAIVER

As an applicant to and/or participant in the Newtown Heritage Festival (NHF) of Stephens City, VA, I hereby waive all claims for loss or damage to any exhibits or property owned by me or my company or under my control at the NHF whether or not any such loss or damage is caused by an act or failure to act by any committee member or volunteer of the NHF or employee of the Town of Stephens City, VA.

Neither the Town of Stephens City nor the Newtown Heritage Festival, nor any employees or volunteers thereof, are responsible or liable for any injury to any persons participating in any NHF sponsored event.

I hereby grant permission for the NHF to publish and/or reproduce any

photographs taken by NHF in future advertising whether printed or in electronic format.

Signature ______ Date

For NHF use only	Date Received _	Fees Received	
Committee	<u>Date</u>	Action/Approval	<u>By</u>
			
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